



PTO/SB/31 (02-01)

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H-1642\$

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NOTICE OF APPEAL FROM THE EXAMINER TO THE
BOARD OF PATENT APPEALS AND INTERFERENCESDocket Number (Optional)
RPP:135D US

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"Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" on July 10, 03

Signature

Typed or printed name Michael L. DunnIn re Application of
Molly F. Kulesz-MartinApplication Number
08/644,289Filed
May 10, 1996For
p53as Protein and Antibody ThereforGroup Art Unit
1642 Examiner
M. Davis# 94
100
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TECH CENTER 1600/2900

Applicant hereby **appeals** to the Board of Patent Appeals and Interferences from the last decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$320.00

Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$_____

A check in the amount of the fee is enclosed.

Payment by credit card. Form PTO02038 is attached.

The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.

The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account No. 04-1790. I have enclosed a duplicate copy of this sheet.

A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the

 applicant/inventor assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed.
(Form PTO/SB/96) attorney or agent of record.

Signature

 attorney or agent acting under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a). _____**Michael L. Dunn**
Typed or printed name
Date
July 10, 03

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of _____ forms are submitted.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.